|   | PATENT A       |   | N MEE DE               |                   |   | ON RECORI                              | <u>,                                    </u> | 812                    | 18      | 4984                | 13                     |              |
|---|----------------|---|------------------------|-------------------|---|--|--|------------------------|---------|---------------------|------------------------|--------------|
|   |                | CLAIMS AS                                 | S FILED - I<br>(Column |                   | (Colui  | mn 2)                                  | SMALL EN                                     |                        | OR      | OTHER<br>SMALL      |                        |              |
| TOTAL CLAIMS  |                |   | 34                     |                   |   |  | RATE   | FEE -                  |         | RATE                | FEE                    | : /.<br>: ., |
| FOR   |                |   | NUMBER FILED           |                   | NUMBER EXTRA  |  | BASIC FEE                                    | 355.00                 | OR      | BASIC FEE           | 710.00                 |              |
| TOTAL CHARGEABLE CLAIMS   |                |   | 34 minus 20=           |                   | 14  |  | X\$ 9=                                       |                        | OR      | X\$18=              | 252 a                  |              |
| IND   | EPENDENT CL    | AIMS                                      | <i>j</i> minus 3 =     |                   | 8   |  | X40=   |                        | OR      | X80=                |                        |              |
| MUI   | TIPLE DEPEN    | DENT CLAIM PI                             | RESENT                 |                   |   |  | +135=  |                        | OR      | +270=               |                        |              |
| • If 1  | the difference | TOTAL                                     |                        | · . L             | TOTAL   | 962.0                                  | 1  |                        |         |                     |                        |              |
|   | .a. CI         |   | A Sections             | ند. <b>بلد</b> نخ | TOTHER  | THAN                                   |  |                        |         |                     |                        |              |
| 2   | 29-05          | (Column 1)                                |                        |                   | mn 2)<br>HEST   | (Column 3)                             | SMALL  |                        | OR      | SMALL               |                        |              |
| NT A  |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                        | NUM<br>PREVI      | ABER<br>OUSLY<br>FOR  | PRESENT<br>EXTRA                       | RATE   | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |              |
| DME   | Total          | . 33                                      | Minus                  | -3                | 4   | =                                      | X\$ 9=                                       |                        | OR      | X\$18= .            | 4                      |              |
| <b>AMENDMENT</b>  | Independent    | . 1                                       | Minus                  | •••               | 3.  | = -                                    | X40= :                                       |                        | OR      | X80=                |                        |              |
|   | FIRST PRESE    | +135=                                     |                        | OR                | +270=   |  | .0   |                        |         |                     |                        |              |
| AMENDMENT 8   |                | (Column 1) CLAIMS REMAINING               |                        | HIG               | (Column 2) (Column 3) HIGHEST NUMBER PRESENT PREVIOUSLY EXTRA |  | ADDIT. FEE                                   | ADDI-<br>TIONAL-       | OR      | ADDIT. FEE          | ADDI-A                 |              |
|   | Total          | AFTER<br>AMENDMENT                        | Minus                  |                   | D FOR   | EXIAN                                  | X\$ 9=                                       | FEE                    | OR      | X\$18=              | FEE                    |              |
| EN  | Independent    | <del> </del>                              | Minus                  | ***               |   | = .                                    | X40=   |                        |         | Voo                 | 1. 19.43 A             | .,,          |
| ¥   | FIRST PRESE    | A4000 45                                  | AVE LONG               | OR:               | 31273   |  |  |                        |         |                     |                        |              |
| <b></b>   | <u> </u>       | +135=                                     |                        | OR                |   |  |  |                        |         |                     |                        |              |
|   |                | . •                                       |                        | •                 |   |  | TOTAL<br>ADDIT, FEE                          |                        | OR      | TOTAL<br>ADDIT. FEE | (* (t)                 |              |
|   | ·              | (Column 1)                                |                        |                   | umn 2)  | (Column 3)                             | <u> </u>                                     |                        |         |                     | 194                    |              |
| AMENDMENT C   |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                        | NU<br>PREV        | SHEST<br>IMBER<br>VIOUSLY<br>ID FOR                           | PRESENT EXTRA                          | RATE   | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |              |
|   | Total          |   | Minus                  | ••                |   | =                                      | X\$ 9=                                       | 22017                  | OR      | <sub>c</sub> X\$18= |                        | 5            |
| NE NE   | Independent    | •   | Minus                  | ***               |   | •                                      | X40=   | 100                    | OR      | X80=                |                        | 1            |
|   | FIRST PRESI    | +135=                                     |                        | OR                | +270=   |  |  |                        |         |                     |                        |              |
| "If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." |                |   |                        |                   |   |  |  |                        | OR      | TOTAL<br>ADDIT FEI  |                        |              |
| "   |                | l I Russdasahs                            | . Daid East IN Th      | nie ebyt.         | : F 10 1000 T   | han 3, enter "3."<br>he highest number |  |                        | ox in o |                     |                        |              |

ب plication or Docket Number